

**Fill in this information to identify the case:**Debtor name Waller Marine, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 17-34230☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>0.00</u>
<b>1b. Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>11,149,109.08</u>
<b>1c. Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>11,149,109.08</u>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>3,045,130.27</u>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>0.00</u>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <u>2,804,370.92</u>
<b>4. Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>5,849,501.19</u>

**Fill in this information to identify the case:**Debtor name Waller Marine, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 17-34230☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. JP Morgan ChaseBusiness Checking1199\$4,998.453.2. Frost BankBusiness Checking1616\$17.003.3. Comerica Bank  
Balance is (116.68)Business Checking7330\$0.003.4. Business First BankBusiness Checking5801\$269.96**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$5,285.41****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

Debtor Waller Marine, Inc.  
NameCase number (If known) 17-34230**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

**11. Accounts receivable**

11a. 90 days old or less: 18,000.00 - 0.00 = .... \$18,000.00  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 2,144,021.03<sup>1</sup> - 2,144,021.03 = .... \$0.00  
face amount doubtful or uncollectible accounts

1. The Debtor and its counsel are looking into whether a claim can be made against Shell for the collection of this receivable.

11b. Over 90 days old: 6,101.84 - 0.00 = .... \$6,101.84  
face amount doubtful or uncollectible accounts

**12. Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$24,101.84**Part 4: Investments****13. Does the debtor own any investments?**

- ☐ No. Go to Part 5.
- ☒ Yes Fill in the information below.

**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity: % of ownership

15.1. Waller LNG Services, Inc. 100% % \$0.00

15.2. Waller LNG Fueling-BR, LLC 100% % \$0.00

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

**17. Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

Debtor Waller Marine, Inc.  
NameCase number (If known) 17-34230**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Furniture and Fixtures (1625) Reference Schedule A attached	\$0.00	Straight Line	\$92,000.00
40.	Office fixtures Leasehold Improvements (1675) Reference Schedule A attached	\$0.00	Straight Line	\$0.00
41.	Office equipment, including all computer equipment and communication systems equipment and software Software (1645) & Telephone/Equipment (1655) Reference Schedule A attached	\$0.00	Straight Line	\$10,057.83
42.	Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles 42.1. Artwork	\$0.00		\$15,000.00
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$117,057.83

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No  
☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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Debtor Waller Marine, Inc.  
NameCase number (If known) 17-3423047. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. <b>2016 Lexus GX 460 4WD 4dr Lease</b>			
<b>VIN No: JTJBM7FX1G5140434</b>	<b>\$0.00</b>		<b>Unknown</b>

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

48.1. <b>Oceangoing Vessel</b>			
<b>Name of Vessel: M/V "Trafalgar"</b>			
<b>Crew of Thirteen (13)</b>			
<b>Dimensions: 121.6' x 36.0' x 20.3'</b>			
<b>Engines are 2-EMD-16-645-E7B with</b>			
<b>Maximum Rating of 2163 KW</b>			
<b>Generator Power: Two (2) "Catepillar"</b>			
<b>Model 3406", 21-KW AC Each</b>			
<b>ABS Load Line or Class: Laid Up Status</b>			
<b>"ABS"</b>	<b>\$0.00</b>	<b>Replacement</b>	<b>\$100,000.00</b>

48.2. <b>Oceangoing Vessel</b>			
<b>Name of Vessel: M/V "Victory"</b>			
<b>Crew of Thirteen (13)</b>			
<b>Dimensions: 121.6' x 36.0' x 20.3'</b>			
<b>Engines are 2-EMD-16-645-E7B with</b>			
<b>Maximum Rating of 2163 KW</b>			
<b>Generator Power: Two (2) "Catepillar"</b>			
<b>Model 3406", 210-KW AC Each</b>			
<b>ABS Load Line or Class: Laid Up Status</b>			
<b>"ABS"</b>	<b>\$0.00</b>	<b>Replacement</b>	<b>\$100,000.00</b>

48.3. <b>2 - 5,000 HP Tugboats</b>			
	<b>\$0.00</b>		<b>\$0.00</b>

49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$200,000.00**52. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☐ No☒ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes Fill in the information below.55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Debtor Waller Marine, Inc.  
NameCase number (If known) 17-34230**Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

**Nature and extent of debtor's interest in property****Net book value of debtor's interest**  
(Where available)**Valuation method used for current value****Current value of debtor's interest**

55.1. **Waller Marine leases two office buildings from David Waller**  
**Property Address:**  
**14410 W Sylvanfield Dr & 14420 W Sylvanfield Dr,**  
**Houston, TX 77069**

**\$0.00****\$0.00**56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
 Copy the total to line 88.

**\$0.00**57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

**General description****Net book value of debtor's interest**  
(Where available)**Valuation method used for current value****Current value of debtor's interest**60. **Patents, copyrights, trademarks, and trade secrets**61. **Internet domain names and websites****Waller Marine website****\$0.00****Unknown**62. **Licenses, franchises, and royalties**  
**Licenses to Harvey Gulf to construct 10 LNG ATB Vessels**

**The Debtor believes that this contract could be as valuable as \$3,800,000, but the value is somewhat speculative because it depends on whether, and to the extent that Harvey Gulf uses the exclusive license.**

**\$0.00****Unknown**63. **Customer lists, mailing lists, or other compilations**  
**Customer Lists****Unknown****Unknown**

Debtor Waller Marine, Inc.  
NameCase number (If known) 17-3423064. **Other intangibles, or intellectual property**  
**Intellectual Property**

The Debtor estimates that its intellectual property could be as valuable as \$10,000,000, but the value is speculative and the Debtor will not know what value to assign to the IP unless and until it secures a deal for some kind of transaction involving the IP (the Debtor is currently exploring such transaction(s)).

\$0.00Unknown65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.0067. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes Fill in the information below.Current value of  
debtor's interest71. **Notes receivable**

Description (include name of obligor)

<u>Due from Westminster Holdings</u>	<u>463,805.00</u>	-	<u>0.00</u>	=	<u>\$463,805.00</u>
	Total face amount		doubtful or uncollectible amount		

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

<u>NOL for 2015- Summary Attached</u>	Tax year <u>2016</u>	<u>\$176,741.00</u>
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<u>Research &amp; Development Credit</u>	Tax year <u>2016</u>	<u>\$10,162,118.00</u>
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73. **Interests in insurance policies or annuities**74. **Causes of action against third parties (whether or not a lawsuit)**

Debtor **Waller Marine, Inc.**  
Name

Case number (If known) **17-34230**

has been filed)

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$10,802,664.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor **Waller Marine, Inc.**  
NameCase number (If known) **17-34230****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$5,285.41</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$0.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$24,101.84</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$0.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$117,057.83</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$200,000.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$10,802,664.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$11,149,109.08</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$11,149,109.08</b>

**Fill in this information to identify the case:**Debtor name **Waller Marine, Inc.**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **17-34230**☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>Business First Bank</b> <small>Creditor's Name</small>  <b>Southwest LA Banking Center</b> <b>728 Ryan Street</b> <b>Lake Charles, LA 70601</b> <small>Creditor's mailing address</small>  <b>Gwen.Himel@B1bank.com</b> <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>November 2012</b> <b>Last 4 digits of account number</b> <b>1170</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Oceangoing Vessel</b> <b>Name of Vessel: M/V "Victory"</b> <b>Crew of Thirteen (13)</b> <b>Dimensions: 121.6' x 36.0' x 20.3'</b> <b>Engines are 2 –EMD -16-645-E7B with</b> <b>Maximum Rating</b> <b>Generator Power: Two (2) "Catepillar" Model</b> <b>3406", 210-KW AC Each</b> <b>ABS Load</b>  Describe the lien <b>Line of Credit</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,470,130.27</b>	<b>\$200,000.00</b>

<b>2.2</b>	<b>Gelman</b> <small>Creditor's Name</small>   <small>Creditor's mailing address</small>   <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>	Describe debtor's property that is subject to a lien  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No	<b>\$575,000.00</b>	<b>\$0.00</b>
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Debtor **Waller Marine, Inc.**  
NameCase number (if know) **17-34230**☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No  
☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent  
☐ Unliquidated  
☐ Disputed2.3 **Westlex Corporation**

Creditor's Name

**17925 North Freeway  
Houston, TX 77090**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**June 22, 2016**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No  
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2016 Lexus GX 460 4WD 4dr Lease  
VIN No: JTJBM7FX1G5140434****\$0.00****Unknown**

Describe the lien

**Auto Lease**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent  
☐ Unliquidated  
☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$3,045,130.27****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**Fill in this information to identify the case:**Debtor name **Waller Marine, Inc.**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **17-34230**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	<b>Nonpriority creditor's name and mailing address</b> <b>ABS Americas</b> <b>16855 Northchase Dr.</b> <b>Houston, TX 77060-6008</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,000.00</b>
3.2	<b>Nonpriority creditor's name and mailing address</b> <b>Adrian Waller</b> <b>18 Champions Colony W</b> <b>Houston, TX 77069</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,287.26</b>
3.3	<b>Nonpriority creditor's name and mailing address</b> <b>ADT</b> <b>PO Box 371878</b> <b>Pittsburgh, PA 15250-7878</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$104.90</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>All-Tex Boiler &amp; Plumbing</b> <b>10635 Tower Oaks Blvd</b> <b>Houston, TX 77070</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,425.26</b>

Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Allen Pac</b> <b>7607 Theisswood Rd</b> <b>Spring, TX 77379</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$48,076.90</b>
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3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Alpha Elevator Inspections</b> <b>P.O. Box 6961</b> <b>Kingwood, TX 77325</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$450.00</b>
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3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Alpha Laser</b> <b>7230 Wynnnpark Drive</b> <b>Houston, TX 77008</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$238.69</b>
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3.8	<b>Nonpriority creditor's name and mailing address</b> <b>American Express</b> <b>P.O. Box 650448</b> <b>Dallas, TX 75265-0448</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$51,978.50</b>
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3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Amtech Elevators</b> <b>P.O. Box 730437</b> <b>Dallas, TX 75373</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Anderson Burnside PLLC</b> <b>1627 West Alabama</b> <b>Houston, TX 77006</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$75,827.16</b>
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3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Anthony Waller</b> <b>18310 Country Walk Dr</b> <b>Spring, TX 77379</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$793.03</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Anthony Waller</b> <b>18310 Country Walk Dr</b> <b>Spring, TX 77379</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31,846.12</b>
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3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Assurant/Sun Life</b> <b>P.O. Box 807009</b> <b>Kansas City, MO 64184-7009</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Aston Corporate Managers, Ltd.</b> <b>P. O. Box 1981</b> <b>George Town KY1-1104</b> <b>Grand Cayman</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,646.59</b>
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3.15	<b>Nonpriority creditor's name and mailing address</b> <b>AT&amp;T Mobility</b> <b>PO Box 6463</b> <b>Carol Stream, IL 60197-6463</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$296.00</b>
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3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Bank of America Master Card</b> <b>PO Box 851001</b> <b>Dallas, TX 75285</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$44,013.38</b>
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3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Brad Wolverton</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,153.83</b>
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3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Brock Breaux</b> <b>17623 Olympic Park Ln</b> <b>Humble, TX 77346</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,692.32</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Cameron Parish Tax Collector</b> <b>P. O. Box 1250</b> <b>Cameron, LA 70631-1250</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,229.68</b>
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3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Cameron Rental Properties</b> <b>111 Garber St.</b> <b>Cameron, LA 70631</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$55,000.00</b>
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3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Capital One Bank USA</b> <b>P.O. Box 60599</b> <b>City of Industry, CA 91716</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,774.32</b>
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3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Capital Roofing Construction, LLC</b> <b>30 Lyerly Street, Suite #2</b> <b>Houston, TX 77022</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,193.38</b>
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3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Chase Card Services</b> <b>PO BOX 94014</b> <b>Palatine, IL 60094-4014</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$24,812.63</b>
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3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Colin Fairey</b> <b>2323 Long Reach Drive, Apt 9103</b> <b>Sugar Land, TX 77478</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,462.50</b>
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3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Comcast - Trunking Services</b> <b>PO Box 37601</b> <b>Philadelphia, PA 19101-0601</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$436.07</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Comcast Business</b> <b>PO Box 660618</b> <b>Dallas, TX 75266-0618</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$295.36</b>
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3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Comerica Bank</b> <b>1601 Elm St</b> <b>Dallas, TX 75201</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Comerica Bank c/o Michael Smith</b> <b>4646 Wild Indigo</b> <b>Suite 110</b> <b>Houston, TX 77027</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,500,000.00</b>
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3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Corral Tran Singh, LLP</b> <b>440 Louisiana Street</b> <b>24th Floor, Suite 2450</b> <b>Houston, TX 77002</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.30	<b>Nonpriority creditor's name and mailing address</b> <b>David Waller</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$182,615.36</b>
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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Discovery Consulting &amp; Computer Services</b> <b>11511 Katy Freeway, Ste 140</b> <b>Houston, TX 77079</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$259.80</b>
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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>Environmental Matters HVAC LLC</b> <b>9421 FM 2920 Bldg 10G</b> <b>Tomball, TX 77375</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,317.40</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Evan Visser</b> <b>8107 Pheasant Gleen</b> <b>Spring, TX 77379</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,692.30</b>
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>Harris Co Alarm</b> <b>P.O. Box 4049</b> <b>Houston, TX 77210-4049</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10.00</b>
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>Harris County Tax Assessor</b> <b>P.O. Box 4622</b> <b>Houston, TX 77210-4089</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,523.25</b>
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Hartford Accident &amp; Indemnity Company</b> <b>PO Box 660916</b> <b>Dallas, TX 75266-0916</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$558.00</b>
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3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Haynes and Boone, LLP</b> <b>PO Box 841399</b> <b>Dallas, TX 75284-1399</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$235,544.79</b>
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3.38	<b>Nonpriority creditor's name and mailing address</b> <b>Hoover Hull Turner LLP</b> <b>111 Monument Circle, Ste 440</b> <b>Indianapolis, IN 46244</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$78,480.44</b>
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3.39	<b>Nonpriority creditor's name and mailing address</b> <b>Hugh Haggerty</b> <b>6526 Cypress point Dr</b> <b>Houston, TX 77069</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,846.14</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.40	<b>Nonpriority creditor's name and mailing address</b> <b>IPFS Corporation</b> <b>PO Box 730223</b> <b>Dallas, TX 73573-0223</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,567.83</b>
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3.41	<b>Nonpriority creditor's name and mailing address</b> <b>IPFS Corporation</b> <b>P.O. Box 412086</b> <b>Kansas City, MO 64141</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.42	<b>Nonpriority creditor's name and mailing address</b> <b>Jensen Maritime Consultants, Inc.</b> <b>PO Box 2930</b> <b>Carol Stream, IL 60132-2930</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27,066.25</b>
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3.43	<b>Nonpriority creditor's name and mailing address</b> <b>Joel Burns</b> <b>59 Pleasant Point Pl</b> <b>Spring, TX 77389</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,384.60</b>
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3.44	<b>Nonpriority creditor's name and mailing address</b> <b>Jones Walker LLP</b> <b>8555 United Plaza Boulevard</b> <b>Baton Rouge, LA 70809-7000</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$900.66</b>
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3.45	<b>Nonpriority creditor's name and mailing address</b> <b>Kaplan Leaman and Wolfe Court Reporters</b> <b>325 Chestnut Street</b> <b>Philadelphia, PA 19106</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$179.80</b>
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3.46	<b>Nonpriority creditor's name and mailing address</b> <b>Klein ISD</b> <b>7200 Spring-Cypress Rd</b> <b>Klein, TX 77379-3299</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$84.88</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.47	<b>Nonpriority creditor's name and mailing address</b> <b>Lexus Financial Services</b> <b>P.O. Box 5855</b> <b>Carol Stream, IL 60197</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,216.62</b>
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3.48	<b>Nonpriority creditor's name and mailing address</b> <b>Libeau Berthelot</b> <b>941 Harmony St</b> <b>New Orleans, LA 70115</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,307.69</b>
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3.49	<b>Nonpriority creditor's name and mailing address</b> <b>Maine Marine Composites</b> <b>2 Portland Fish Pier</b> <b>Portland, ME 04101</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,970.00</b>
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3.50	<b>Nonpriority creditor's name and mailing address</b> <b>Noise Control Engineering LLC</b> <b>799 Middlesex Turnpike, Suite 4B</b> <b>Billerica, MA 01821</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,450.00</b>
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3.51	<b>Nonpriority creditor's name and mailing address</b> <b>Northwest H.C. M.U.D. #21</b>  <b>TX</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$59.70</b>
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3.52	<b>Nonpriority creditor's name and mailing address</b> <b>Office Depot</b> <b>'P.O. Box 78004, Dept. 56 - 4100072882</b> <b>Phoenix, AZ 85062-8004</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50.00</b>
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3.53	<b>Nonpriority creditor's name and mailing address</b> <b>Paul Alexander</b> <b>PO Box 403</b> <b>Cameron, LA 70631</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,100.00</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.54	<b>Nonpriority creditor's name and mailing address</b> <b>ProTex</b> <b>15219 Stuebner Airline Rd, Ste 25</b> <b>Houston, TX 77069</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.55	<b>Nonpriority creditor's name and mailing address</b> <b>Republic Group</b> <b>PO Box 660270</b> <b>Dallas, TX 75266-0270</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$347.20</b>
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3.56	<b>Nonpriority creditor's name and mailing address</b> <b>Republic Group</b> <b>P.O. Box 660270</b> <b>Houston, TX 77014</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.57	<b>Nonpriority creditor's name and mailing address</b> <b>Spring ISD</b> <b>P.O. Box 4826</b> <b>Houston, TX 77210-4826</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,130.85</b>
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3.58	<b>Nonpriority creditor's name and mailing address</b> <b>Staines &amp; Eppling</b> <b>3500 North Causeway Boulevard, Ste 820</b> <b>Metairie, LA 70002</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$625.00</b>
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3.59	<b>Nonpriority creditor's name and mailing address</b> <b>Stephen James McKillop</b> <b>2631 Palo Pinto Dr</b> <b>Houston, TX 77080</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$19,615.37</b>
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3.60	<b>Nonpriority creditor's name and mailing address</b> <b>Stephen John McKillop</b> <b>14555 Philippine St</b> <b>Houston, TX 77040</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$58,288.43</b>
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Debtor	<b>Waller Marine, Inc.</b> Name	Case number (if known)	<b>17-34230</b>
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3.61	<b>Nonpriority creditor's name and mailing address</b> <b>Stephen Koch</b> <b>25110 Burgh Castle Dr</b> <b>Spring, TX 77389</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,500.00</b>
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3.62	<b>Nonpriority creditor's name and mailing address</b> <b>Stephen Wolverton</b> <b>2603 Fern Lacy Dr</b> <b>Spring, TX 77388</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.63	<b>Nonpriority creditor's name and mailing address</b> <b>Steven Stapleton</b> <b>4115 Louetta Rd, Apt 10202</b> <b>Spring, TX 77388</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,769.22</b>
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3.64	<b>Nonpriority creditor's name and mailing address</b> <b>Texas Comptroller of Public Accounts</b> <b>P.O. Box 13528</b> <b>Capitol Station</b> <b>Austin, TX 78711-3528</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,000.00</b>
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3.65	<b>Nonpriority creditor's name and mailing address</b> <b>Thomson Reuters</b> <b>P. O. Box 6292</b> <b>Carol Stream, IL 60197-6292</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$571.71</b>
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3.66	<b>Nonpriority creditor's name and mailing address</b> <b>Timmerman Beaulieu Hinkle &amp; Esworthy, LL</b> <b>29 W. Susquehanna Ave., Ste 402</b> <b>Townson, MD 21204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$74,321.60</b>
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3.67	<b>Nonpriority creditor's name and mailing address</b> <b>Trev-Co, Inc.</b> <b>15543 David's Court</b> <b>Biloxi, MS 39532</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$58,175.00</b>
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Debtor **Waller Marine, Inc.**  
NameCase number (if known) **17-34230**

3.68	Nonpriority creditor's name and mailing address <b>TXU Energy</b> <b>PO Box 650638</b> <b>Dallas, TX 75204</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,307.15</b>
3.69	Nonpriority creditor's name and mailing address <b>United Healthcare</b> <b>Department CH 10151</b> <b>Palatine, IL 60055-0151</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.70	Nonpriority creditor's name and mailing address <b>Wells &amp; Cuellar, P.C.</b> <b>440 Louisiana, Suite 718</b> <b>Houston, TX 77002</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.71	Nonpriority creditor's name and mailing address <b>William Hayden</b> <b>6903 Walton Heath Dr</b> <b>Houston, TX 77040</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42,500.00</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>0.00</b>
5b. +	\$ <b>2,804,370.92</b>
5c.	\$ <b>2,804,370.92</b>

**Fill in this information to identify the case:**Debtor name Waller Marine, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 17-34230☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**Commerical Lease Agreement for Building located at for 14410 & 14420 W Sylvanfield Dr, Houston, TX, 77014**  
**4 Months****David Brice Waller**  
**6230 Pebbel Beach Dr.**  
**Houston, TX 77069**

2.2. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**2016 Lexus GX 460**  
**FWD 4dr - VIN No.**  
**JTJBM7FX1G5140434****23 Months****Westlex Corporation**  
**17925 North Freeway**  
**Houston, TX 77090**

**Fill in this information to identify the case:**Debtor name **Waller Marine, Inc.**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **17-34230**☐ Check if this is an amended filing**Official Form 206H****Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **David B. Waller** **6230 Pebble Beach Blvd**  
**Houston, TX 77069**

**Business First Bank**

☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.2 **David B. Waller** **6230 Pebble Beach Blvd**  
**Houston, TX 77069**

**Comerica Bank c/o**  
**Michael Smith**

☐ D \_\_\_\_\_  
☒ E/F **3.28**  
☐ G \_\_\_\_\_

2.3 **David B. Waller** **6230 Pebble Beach Blvd**  
**Houston, TX 77069**

**Gelman**

☒ D **2.2**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

**EXHIBIT "1"****Schedule A**

Category	Description	Valuation Method	Initial Interest	Accum Dep	Net Book Value
<b>Furniture and Fixtures (1625)</b>	FURNITURE	Staright Line	4,300.00	4,300.00	-
	FURNITURE	Staright Line	8,826.00	8,826.00	-
	FURNITURE	Staright Line	2,458.00	2,458.00	-
	CONFERENCE TABLE	Staright Line	500.00	500.00	-
	3 DESKS/CRDNZA/CHRS	Staright Line	4,409.00	4,409.00	-
	F&F (TYLER SRVC)	Staright Line	2,100.00	2,100.00	-
	F&F (VARIOUS)	Staright Line	23,142.00	23,142.00	-
	F&F (TYLER SRVCS)	Staright Line	1,754.00	1,754.00	-
	F&F (MCCOY & ASS)	Staright Line	3,486.00	3,486.00	-
	MISC FURNITURE	Staright Line	3,101.00	3,101.00	-
	ANTIQUES ETC	Staright Line	1,648.00	1,648.00	-
	F&F (Jimmy Schmidt invce)	Staright Line	2,150.00	2,150.00	-
	FURNITURE (CAPITAL FURN)	Staright Line	3,951.00	3,951.00	-
	F&F (AMEX PURCHASE)	Staright Line	4,474.00	4,474.00	-
	DESK/FURN (A. WALLER)	Staright Line	4,539.00	4,539.00	-
		Staright Line	1,194.00	1,194.00	-
	MS APARTMENT FURNITURE	Staright Line	7,462.00	7,462.00	-
	Office Furniture	Staright Line	5,144.00	4,286.67	857.33
	Office Furniture - Nelson Reid	Staright Line	10,000.00	7,738.10	2,261.90
	NOLA Office Furniture	Staright Line	5,395.81	4,111.09	1,284.72
	NOLA Office Furniture	Staright Line	1,171.58	892.63	278.95
	NOLA Office Furniture	Staright Line	3,558.90	2,626.81	932.09
	NOLA Office Furniture	Staright Line	1,870.40	1,336.00	534.40
	NOLA Office Furniture	Staright Line	747.50	533.93	213.57
	<b>Total Furniture and Fixtures</b>		<b>107,382.19</b>	<b>101,019.23</b>	<b>6,362.96</b>
<b>Software (1645)</b>	COADE SOFTWARE-CADWORX	Staright Line	3,897.00	3,897.00	-
	SOFTWARE INSTALL EXP	Staright Line	2,463.00	2,463.00	-
	COADE SOFTWARE-CADWORX	Staright Line	2,598.00	2,598.00	-
	SOFTWARE (DISCOVERY CNSLT)	Staright Line	2,814.00	2,814.00	-
	Great Plains	Staright Line	36,672.73	36,672.73	-
	BENTLEY MULTIFRAME ADVANCED	Staright Line	5,987.76	5,987.76	-
	<b>Total Software</b>		<b>54,432.49</b>	<b>54,432.49</b>	<b>-</b>
<b>Telephone/Equipment (1655)</b>	TELEPHONE VOICE MAIL SYS	Staright Line	2,777.00	2,777.00	-
	PHOTOCOPIER (MODERN COPY)	Staright Line	7,572.00	7,572.00	-
	14420 SYLVNFD ELEVATOR	Staright Line	11,668.00	7,973.13	3,694.87
	ADT SECURITY SYSTEM	Staright Line	11,134.00	11,134.00	-
	KRAUTKRAMER ULTRASONIC GAU	Staright Line	2,265.00	2,265.00	-
	<b>Total Machinery &amp; Equipment</b>		<b>35,416.00</b>	<b>31,721.13</b>	<b>3,694.87</b>
<b>Leasehold Improvements (1675)</b>	LHI - 14420 SYLVNFD OFFIC	Staright Line	103,188.00	44,714.80	58,473.20
	Architecture (Sparc Design)	Staright Line	1,950.00	628.33	1,321.67
	Lonestar Roofing - 14410 Roof Repair	Staright Line	22,388.38	2,238.84	20,149.54
	<b>Total Leasehold Improvements</b>		<b>105,138.00</b>	<b>45,343.13</b>	<b>59,794.87</b>
<b>Totals</b>			<b>302,368.68</b>	<b>232,515.98</b>	<b>69,852.70</b>